UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:	Case No. 16-27942
JEROME HOOD	
BRIDGET HOOD	
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 08/31/2016.
- 2) The plan was confirmed on $\frac{11/03/2016}{2}$.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on 09/28/2017.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was completed on $\frac{12}{04}$ 2018.
 - 6) Number of months from filing to last payment: 27.
 - 7) Number of months case was pending: 29.
 - 8) Total value of assets abandoned by court order: NA.
 - 9) Total value of assets exempted: \$1,800.00.
 - 10) Amount of unsecured claims discharged without payment: \$23,315.40.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$7,125.00 Less amount refunded to debtor \$172.53

NET RECEIPTS: \$6,952.47

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$4,000.00
Court Costs \$0.00
Trustee Expenses & Compensation \$315.59
Other \$171.76

TOTAL EXPENSES OF ADMINISTRATION: \$4,487.35

Attorney fees paid and disclosed by debtor: \$0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
CAPITAL ONE AUTO FINANCE	Unsecured	9,704.00	NA	NA	0.00	0.00
CAPITAL ONE AUTO FINANCE	Secured	9,050.00	18,937.14	18,937.14	0.00	0.00
CHICAGO ACCEPTANCE	Unsecured	5,488.00	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENU	Unsecured	536.80	4,736.80	4,691.52	2,220.36	0.00
CREDIT PROTECTION ASSOC	Unsecured	3,119.81	NA	NA	0.00	0.00
JH STROGER HOSP OF COOK COUNT	Unsecured	249.02	NA	NA	0.00	0.00
RESURGENT CAPITAL SERVICES	Unsecured	522.00	517.17	517.17	244.76	0.00
SINAI HEALTH SYSTEM	Unsecured	511.00	NA	NA	0.00	0.00
ST ANTHONY HOSPITAL	Unsecured	1,500.00	NA	NA	0.00	0.00

Claim	Principal	Interest
<u>Allowed</u>	<u>Paid</u>	<u>Paid</u>
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$18,937.14	\$0.00	\$0.00
\$18,937.14	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$5,208.69	\$2,465.12	\$0.00
	\$0.00 \$0.00 \$0.00 \$18,937.14 \$18,937.14 \$0.00 \$0.00 \$0.00 \$0.00	Allowed Paid \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$18,937.14 \$0.00 \$18,937.14 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$4,487.35 \$2,465.12	
TOTAL DISBURSEMENTS :		<u>\$6,952.47</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 01/16/2019 By: /s/ Tom Vaughn
Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.